



0000116276

5-03280A-00-0000

Fold at the over top of envelope to the right of the return address

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
☐ Complete items 3, 4a, and 4b.
☐ Print your name and address on the reverse of this form so that we can return this card to you.
☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
☐ Write "Return Receipt Requested" on the mailpiece below the article number.
☐ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

3. Article Addressed to:

Joseph Michael Guess, SR.
 2911 E. Calavar Road
 Phoenix, AZ 85032

4a. Article Number

P6181810773

4b. Service Type

- ☐ Registered
☐ Express Mail
☒ Certified
☐ Insured
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

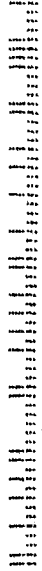
PS Form 3811, December 1994

102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

6. Signature (Addressee or Agent)

5. Received By: (Full Name)



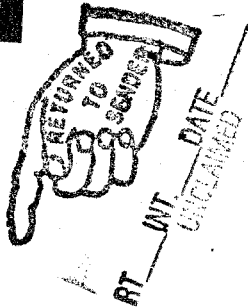
68 2495X2058

AUG 31 2000

AUG 16 2000

Joseph Michael Guess, SR.
 2911 E. Calavar Road
 Phoenix, AZ 85032

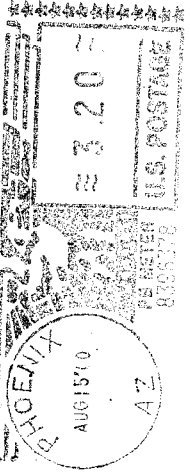
MAIL



Z CORP COMMISSION DOCUMENT CONTROL

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E22 98T 8T9 P

ARIZONA CORPORATION COMMISSION
 1200 W. Washington - Util. Div./Docket
 Phoenix, Arizona 85007-2996